



Esophageal Schwannoma with Atypical Chest Pain: a Case Report

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Background

Benign primary tumors of the esophagus are uncommon, and account for only 2% of all esophageal tumors. Schwannomas are one of the rare benign esophageal tumors.

Case Presentation

A 46-year-old man came with complaints of atypical chest pain, normal ECG. Patient experienced no weight loss and no sign of dysphagia. An enlargement of mediastinum was found on chest x-ray with remarkable laboratory studies. CT Scan showed a lobulated tumour (100x70x25 mm) in the middle mediastinum, with homogenous inner structure. The mass was located between mucosa and muscularis propria and adventitia. There were sign of compression of the esophagus lumen.

We performed right thoracotomy to approach the mass, resect the tumour and the esophagus was sutured primarily, and no leak was found. The patient was sent to the intensive care. Biopsy showed high cell proliferation encircling the vessel. Tumour nucleus were shaped like a spindle, equal chromatin across the nuclei, with minimal cytoplasm and some atypical cells. Mitosis cell are scarce, with absence of necrosis. Immunohistochemistry result was positive in S-100 protein. These finding confirmed the diagnosis of schwannoma. Postoperative course was uneventful, and the patient was discharged on the 5th postoperative day.



Figure 1

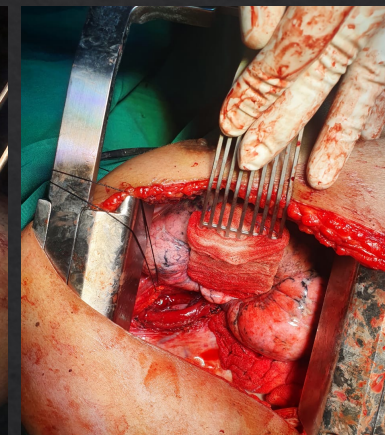


Figure 2

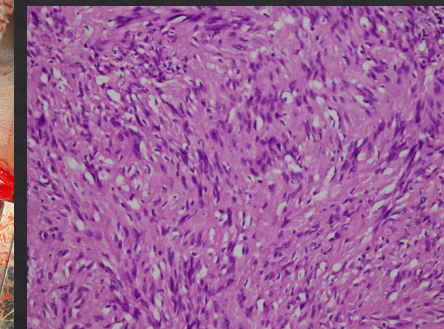


Figure 3

Fig 1. We resect the tumour in the esofagus and
Fig 2. Close with primary suture
Fig 3. Histopatology of spindle cell tumour confirming the diagnosis of Schwannoma

Discussion

This was a unique case where the patient was presented with an atypical chest pain and there was no sign of gastrointestinal problem. Esophageal schwannoma is rare and should be considered in the differential when a chest pain is involved .

Conclusion

The rare case of schwannoma in the esophagus can be manifested by atypical chest pain.

Reference:

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